

**SE-490****Assessment of Contract Liquidated Damages**

AGENCY: _____
(Name)

PROJECT: _____
(Number) (Name)

In accordance with the Contract Documents for the Project, the Agency has assessed and is retaining Liquidated Damages in the amount shown below:

1. Date of Commencement: *(Per SE-390)* _____
2. Original Contract Time (days): *(Per SE-390)* _____
3. Days Added by Change Order: *(Per SE-480)* _____
4. Required Substantial Completion Date: *(Per SE-480)* _____
5. Date of Actual Substantial Completion: *(Per SE-550A)* _____
6. Difference (days): _____
(Line 5 minus Line 4, in calendar days)
7. Step One Liquidated Damages, per diem: *(Per SE-390)* _____
8. Step One Liquidated Damages assessed: _____
(Line 6 times Line 7)
9. Final Completion Time (days): *(Per SE-390)* _____
10. Required Final Completion Date: _____
(Line 5 plus Line 9)
11. Date of Actual Final Completion: *(Per SE-560C)* _____
12. Difference (days): _____
(Line 11 minus Line 10, in calendar days):
13. Step Two Liquidated Damages, per diem: *(Per SE-390)* _____
14. Step Two Liquidated Damages assessed: _____
(Line 12 times Line 13)
15. **TOTAL DOLLAR AMOUNT OF LIQUIDATED DAMAGES ASSESSED:** _____

Comment: *(Attach additional pages if necessary.)* _____

(Print or Type Name of Contractor Representative/OPTIONAL) (Signature) (Date)

(Print or Type Name of A/E Representative) (Signature) (Date)

(Print or Type Name of Agency Representative) (Signature) (Date)

INSTRUCTIONS TO THE AGENCY:

1. Submit a copy of the of the completed SE-490 to the OSE Project Manager
2. Mail a copy of the completed SE-490 to the A/E and Contractor.
3. Retain the original SE-490 in the Agency's procurement file.